	PATENT	APPLICATI Effe	ON FEE D		INATI	ON RECO	R5 Y	•		_	- 72°	
CLAIMS AS FILED - PART I (Column 1) (Column 2)									NTITY	OR	OTHER SMALL	
TO	TAL CLAIMS		4	45				ATE.	FEE	1	RATE	FEE
FOR			NUMBER	NUMBER FILED		NUMBER EXTRA		C FEE	370.00	OR	BASIC FEE	740.00
TC	TAL CHARGE	45mi	45 minus 20=		. 25		X\$ 9=		OR	X\$18=	400	
NDEPENDENT CLAIMS			9 "	/ minus 3 =		. 6		X42=		1	X84=	CN
VIL	LTIPLE DEPEN	NDENT CLAIM	PRESENT	RESENT						OR		909
* If the difference in column 1 is less than zero, enter "0" in column 2								+140=		OR	+280=	
••						Diulii 2	то	TAL	<u></u>	ОЯ	TOTAL	1674
		(Column 1)		Colui)		(Column 3)	SM	ALL	ENTITY	OR	OTHER SMALL	
AMENDINEN! A		REMAINING NU AFTER PREV		HIGH NUM PREVIO RAID	BER	PRESENT EXTRA	. RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 33	Minus	-7	5	-\	XS	9=		OR	×\$\(18=	FEE
	Independent	. 7	Minus	(		•	X4	2=		OR	X84=	
•	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							10			-000	
						200		OTAL		OR	+280= TOTAL	7
-	-31.00	- > (Column 1)		(Colui	ma 21	(Caluma 2)	ADDIT		<u> </u>	OR	ADDIT. FEE	
		CLAIMS		HIGH	EST	(Column 3)			ADDI-			ADDI-
		AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT	RA	TE	TIONAL FEE		RATE	TIONAL
	Total	.33	Minua	U	5	*/>	X\$	9=		OR	X\$18=	\
	Independent	· M	Minus		9		X4	2=		OR	X84=	. \
	PHST PHESE	NTATION OF A	AULTIPLE DE	PENDENT	CLAIM		1 14	0=		OR	+280=	1
								OTAL			TOTAL	1
(Column 1) (Column 2) (Column 3)								FEE			ADDIT. FEE	
Charles Ment		CLAIMS REMAINING AFTER		HIGH NUM PREVIO		EST BER PRESENT DUSLY EXTRA		ΤE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total	AMENDMENT	Minus	PAID	<del>run</del>		xs	_	FEE		X\$18=	FEE
	Independent		Minus	***		E-				OR		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							2=		OR	X84=	
							+14	0-		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
	if the "Highest Nuri	moer Previously P moer Previously P	aid For (Total o	r Independ	s less tha ont) is the	in 3, enter "3." highest numbe	r found in 1	ue abi	propriate bo			

FORM PTO-875 (Rev. 8/01)

Patient and Trademark Office, U.S. DEPARTMENT